



King County

**Department of Development and Environmental Services
Land Use Services Division**

900 Oakesdale Avenue Southwest
Renton, Washington 98055-1219
206-296-6600 TTY 206-296-7217

**Conversion Option
Harvest Plan
APPLICATION FOR REVIEW**

For alternate formats, call 206-296-6600.

PART I: To be completed by applicant.

Project Name: _____ Location: _____

Description of Project:

Tax Parcel No(s).: _____ Zoning: _____

Applicant: _____ Owner: _____

Address: _____ Address: _____

Phone No.: _____ Phone No.: _____

Note: If applicant is other than the owner, authorization from legal owner must be provided.

Agent: _____

Address: _____

Phone No.: _____

Total size of parcel: _____ acres

Total area to be logged: _____ acres

Total area to be cleared: _____ acres (roads, landings, etc.)

Estimated volume: _____ MBF

List any known or suspected critical areas identified on or adjacent to the site: _____

Check out the DDES Web site at www.metrokc.gov/ddes

PART II: To be completed by DDES.

Submittal Requirements:

	Quantity
Application for review	_____
Logging site plan	_____
Erosion control plan	_____
Drainage plan/calcs	_____
Soils/geotech report	_____
Wetlands/stream report	_____
Certification of applicant status	_____
Affidavit of critical areas compliance	_____
Other (list)	_____
_____	_____
_____	_____
_____	_____

Fees: COHP review fees are assessed at the Department's current hourly rate (\$144.90/hour as of January 1, 2004) for all professional staff review and inspection time. An estimate of total review costs will be prepared in conjunction with the pre-application meeting. A deposit, covering 50% of the estimated total cost, will be required with the application. If the pre-application meeting is waived, an initial deposit of \$289.80 will be required at the time of filing the application and the estimate of total review costs will be prepared within twenty-eight days of the filing of the application. The 50% deposit will be required prior to the Department commencing review of the application.

Plan review: _____ hrs. @ \$144.90/hr = _____

Critical areas review:

geo _____

wetland/stream _____

Drainage review: _____

Total fees collected at time of application: _____

Approved for submittal by: _____ Date: _____

Accepted by: _____ Date: _____

The applicant understands that signing and submitting this application authorizes DDES staff to inspect the site at any reasonable time for the purpose of permit review.

Signed: _____ Date: _____

Check out the DDES Web site at www.metrokc.gov/ddes